

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthant
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S12332 (0)

1. Corporation Name

SDS DEVELOPMENT, INC.



Principal Place of Business

1880 N DIXIE HWY
BOCA RATON FL 33432

Mailing Address

1880 N DIXIE HWY
BOCA RATON FL 33432

3. Date Incorporated or Qualified
11/09/1990

3a. Date of Last Report
01/31/1995

2. Principal Place of Business

2a. Mailing Address

21 1734 COSTA DEL SOL 26 1734 COSTA DEL SOL

4. FEI Number
65-0226467

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 BOCA RATON, FL 27 BOCA RATON, FL

23 33432 28 33432

24 USA 29 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZANDER, STEVE
1880 NORTH DIXIE HWY
BOCA RATON FL 33432

81 Name

82 1734 COSTA DEL SOL

83 BOCA RATON FL 85 33432

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0502, Florida Statutes.

SIGNATURE

STEVE ZANDER, PRES.

NOTE: Registered Agent signature required when not existing

DATE

2-10-96

12. OFFICERS AND DIRECTORS

TITLE D
NAME ZANDER, STEVE
STREET ADDRESS 21428 54TH DR., S.
CITY-ST-ZIP BOCA RATON FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

500001756235
-03/25/96--01077--014
***200.00

Ym-m
3-25-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

330.96

313-8889

CR2E034 (12/95)